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Groundwater and Wastewater Services File Imaging Project
May 2007
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1194B

SOIL AND SITE REPORT FOR A GROUND ABSORPTION WASTEWATER SYSTEM

by

JOE LYNN, REGIONAL SOIL SPECIALIST
ON-SITE WASTEWATER SECTION
DIVISION OF ENVIRONMENTAL HEALTH

Submitted to:

BILL MARLIN, SOIL SCIENTIST
MECKLENBURG COUNTY HEALTH DEPARTMENT

MARCH 31, 1994

Joe Lynn
Regional Soil Specialist

SUMMARY

This site is **UNSUITABLE** for a ground absorption wastewater treatment and disposal system under current laws and rules 15A NCAC 18A .1900. **No ground absorption wastewater (septic tank) system can be permitted on this site.**

Conventional systems	NO
Shallow conventional systems	NO
Large Diameter Pipe systems	NO
Prefabricated Porous Block Panel systems	NO
Low Pressure Pipe Systems	NO
Fill Systems	NO
Aerobic Treatment Systems	NO

This report gives a brief summary of the findings, conclusions, and recommendations.

If you have any questions or I can be of assistance contact me at the Mooresville Regional Office (704) 663-1699.

INTRODUCTION

COUNTY: Mecklenburg

OWNER/APPLICANT: Howard Vieklee Dirkler GJ 4-6-94

LOCATION: # 28 Lake Ridge Road for house, sewage system off site on Crescent Resources property

TYPE OF FACILITY: Residence

DESIGN UNIT: 360 gpd

PROPOSED WATER SUPPLY: On-site well

EVALUATED BY: Joe Lynn assisted by Bill Marlin using backhoe pits

DATE OF EVALUATION: March 7, 1994

OTHER(S) PRESENT: Toni Newell and backhoe operator

SITE INFORMATION

AREA/PRESENT USE: Approximately 20,000 sq. ft. / wooded

TOPOGRAPHY: 5 to 10 percent

LANDSCAPE POSITION: Nose and linear slopes

SITE LIMITATIONS: Drainage features

SOIL INFORMATION

SOIL TEXTURE: (surface) Sandy loam and loam
(subsoil) Clay

SOIL STRUCTURE: (subsoil) Blocky

CLAY MINERALOGY: Slightly expansive and expansive at 10 to 12 inches

SOIL DEPTH: 22 to 36 inches to saprolite, rock, or parent material

SAPROLITE: 22 to 36 inches to unsuitable saprolite

SOIL WETNESS: N/A

RESTRICTIVE HORIZONS: None

AREA of S or PS SOIL: None found

CONCLUSIONS

This site is unsuitable for the installation of a conventional ground absorption wastewater system due to:

1. Unsuitable Topography and Landscape Position — Section .1940
   Drainage features (gullies)
2. Unsuitable Soil Characteristics — Section .1941
   Expansive clay mineralogy
3. Insufficient Soil Depth — Section .1943
   Soil depths of less than 36 inches
4. Insufficient Available Space — Section .1945
   Not enough area for an initial sewage system and a repair if needed.

The site is Unsuitable under Rule .1956 Modifications to Septic Tank Systems. Neither shallow trenches, large diameter pipe, nor porous block panel systems are options for this site. The saprolite is unsuitable by this rule (greater than 20 per cent clay and slightly sticky and slightly plastic). Drainage will not be helpful in reclassify the site to Provisionally Suitable.

The site is Unsuitable under Rule .1957 Alternative Sewage Systems. Neither a fill system nor an aerobic treatment unit are options for this site. There is sufficient soil depths on part of the site for a low pressure pipe system. There is sufficient space for the initial system, but not enough space for the repair system.

RECOMMENDATIONS

The owner has the following options that might allow the use of this property as desired:

1. The applicant may purchase other Suitable or Provisionally Suitable property to place the ground absorption sewage system on, the repair system.
2. The applicant may obtain an easement on a Suitable or Provisionally Suitable property to place the ground absorption sewage system on.
3. The Division of Environmental Management in Mooresville, N. C. at (704) 663-1699 may be contacted to pursue options available through that office.
4. A sewage system can be pursued under Rule 1948 (d). Written documentation must be submitted to your office showing that the proposed sewage system can be expected to function properly. The data must contain the following:
   A. The effluent must be non-pathogenic, non-infectious, non-toxic, and non-hazardous.
   B. The ground water and the surface water must not be contaminated by the effluent.
   C. The effluent must not be exposed to the ground surface or discharged to surface waters where it could come into contact with people, animals, or vectors.

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 20151

9165 A 1
File: 1148
Action 3
Parcel: po 217-161-01
☐ PC

Location: Lake Ridge Road

Subdivision:

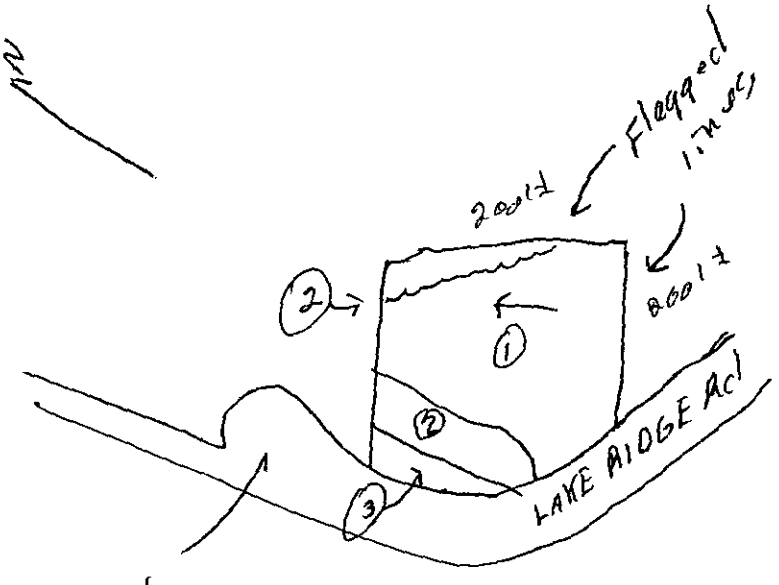
Lot: Block: Acres: Approx. 1.0

Owner: Crescent Resources, Inc.
Address: PO Box 1003
Charlotte, N.C. 28201-1003

Comments: 100% ~~Repair~~ Repair

Described by: William R. Medlin

Date:



cul-de-sac
Not constructed

***** EVALUATION KEY *****
S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 6-12%	S PS (U) complex slopes	(S) PS U 6-15%	S PS U	S PS U	S PS U
Texture	S PS (U) Expansive clay	S PS U —	S PS (U) Expansive clay	S PS U	S PS U	S PS U
Structure	S (PS) U subst. blocky	S PS U —	S (PS) U subst. blocky	S PS U	S PS U	S PS U
Drainage	S (PS) U 7-36" to water	S PS U —	S PS (U) perched water 15-25"	S PS U	S PS U	S PS U
Depth	S PS (U) ~~22-36"~~	S PS U —	S PS (U) 25" or less	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7-36"	S PS U —	S (PS) U 7-36"	S PS U	S PS U	S PS U
Available Space	S (PS) U	S PS U —	S PS (U) Restricted	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	series not determined	complex slopes	Helena/ Wilkes			
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

Mecklenburg County
Health Department

Betty S. Snow, R.N., M.A.
Health Director

January 7, 1994

Crescent Resources, Inc
P. O. Box 1003
Charlotte, NC 28201-1003

RE: Property located at Lake Ridge Road
FILE: 1194B/9165A
PARCEL: 217-161-01PO

Dear Ms. Sirs:

At your request a soils investigation was conducted on the property designated above. Results of this investigation showed the site to be classified as **UNSUITABLE** under criteria as set forth in 15A NCA 18A .1900 of Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal, August 1, 1991. Evaluation Report (Serial Number 20151) is enclosed.

The soil on this property is not suitable for use with any conventional, modified or alternative system of which I am aware. If you wish to exercise your right of appeal concerning the interpretation and enforcement of these rules you may do so in accordance with G.S. 150B-23.

If there are any questions, please contact Bill Marlin at 336-5574.

Sincerely,

Kelly Randall, R.S., Soil Scientist
Individual Water and Wastewater Systems

Enclosure

VIRKLER
ALWAYS A STEP AHEAD

February 3, 1994

Mr. Bill Marlin
Mecklenburg County Health Department
Environmental Health Division
700 N. Tryon
Charlotte, NC 28202

Dear Mr. Marlin:

Per our conversation of yesterday, enclosed is the application and proposed plot plan of the area to be tested.

We look forward to hearing from you in the near future. If you should have any questions, please feel free to contact me.

Sincerely,

Denise L. Bowers
Executive Assistant

/dlb

Enclosures

12345 STEELE CREEK ROAD • CHARLOTTE, NC 28273 USA • FAX: 704-587-4329 • PHONE: 704-588-8500
SERVICE HOTLINE: 1-800-847-5537 (1-800-VIRKLER)

1948

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

PERSON FILING APPLICATION:

NAME: Vicklee (last) Howard (first) E. (mi)

ADDRESS: 12345 Steele Creek PHONE: (704) 588-8500

CITY: Charlotte STATE: NC ZIPCODE: 28273

Date: Feb 1, 1994

PROPERTY OWNER:

NAME: Same as Above (last) (first) (mi)

ADDRESS: _____ PHONE: (__) _____

CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 217-212 #29

STREET ADDRESS: #29 Lake Ridge Rd

ZONING: _____

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[X] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [] 7 Mint Hill

LOT NUMBER: 28 + 29 LOT SIZE (in acres):

TYPE APPLICATION (check one):

[] SOIL TEST - INDIVIDUAL LOT (D)
[X] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[] SOIL TEST DEVELOPMENT (P)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [X] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 4

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY: N/A
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
[] Community (C) [] Shared Well (S)
[] Municipal (M) [] Other 'spring' (O)
[X] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [] Workshop [] None
[] Garage [] Storage Building [] Deck/Patio [] Bedrooms [] Other

The undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: [signature] Date: Feb 1, 1994

NOTICE: Drainage Field Accordiug to attached Map

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

...

[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

_____ Environmentalist Date

_____ Director or Authorized Section Head Date

WWATER : 122791

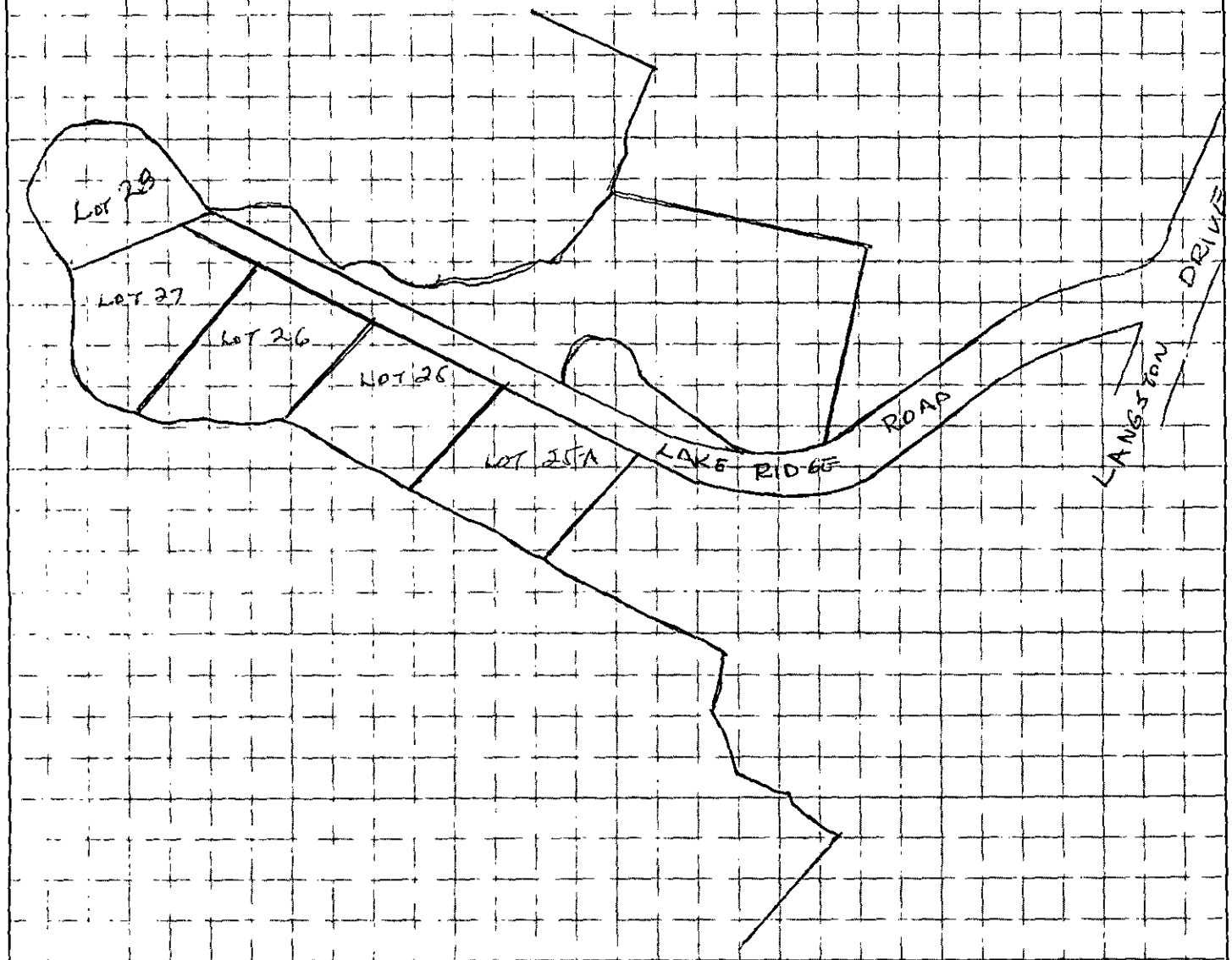
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 1194B

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



APPROVAL DATE _____

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

1194B

Mecklenburg County
Health Department

Betty S. Snow, R.N., M.A.
Health Director

April 8, 1994

Howard E. Virkler
12345 Steele Creek Road
Charlotte, NC 28273

Dear Mr. Virkler:

Enclosed you will find a copy of the report from Joe Lynn, Regional Soil Specialist, with regard to the soil investigation made on the property located on Lake Ridge Road. This property is shown as a portion of parcel 217-161-01. It is located to the right of Lake Ridge Road off Langston Drive.

Sincerely,

William R. Marlin

William R. Marlin
Soil Scientist

WM:gf

cc: Crescent Resources, Inc., Susie Williams

2nd site

PD 50' clr 12/9/93

1194B/916B

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

PERSON FILING APPLICATION:

NAME: CRESCENT RESOURCES, INC.
(last) (first) (mi)

ADDRESS: P. O. Box 1003 PHONE: (704) 373-8428 ~~4987~~

CITY: Charlotte, STATE: NC ZIPCODE: 28201-1003

Date:

PROPERTY OWNER:

NAME: CRESCENT RESOURCES, INC.
(last) (first) (mi)

ADDRESS: _____ PHONE: (___) _____

CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: P/O 217-161-01

STREET ADDRESS: Lake Ridge Road

ZONING:

Township (check one):
[X] 0 Mecklenburg County [] 1 Charlotte [] 2 Davidson [] 3 Cornelius [] 4 Pineville [] 5 Matthews [] 6 Huntersville [] 7 Mint Hill

SUBDIVISION OR MOBILE HOME PARK NAME: Lake Wylie

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):

[] SOIL TEST - INDIVIDUAL LOT (D)
[] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[] SOIL TEST DEVELOPMENT (P)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
[] Community (C) [] Shared Well (S)
[] Municipal (M) [] Other 'spring' (O)
[] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [] Workshop [] None
[] Garage [] Storage Building [] Deck/Patio [] Bedrooms [] Other

The undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: CRESCENT RESOURCES, INC. Bob Bartlo Date: December 7, 1993

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

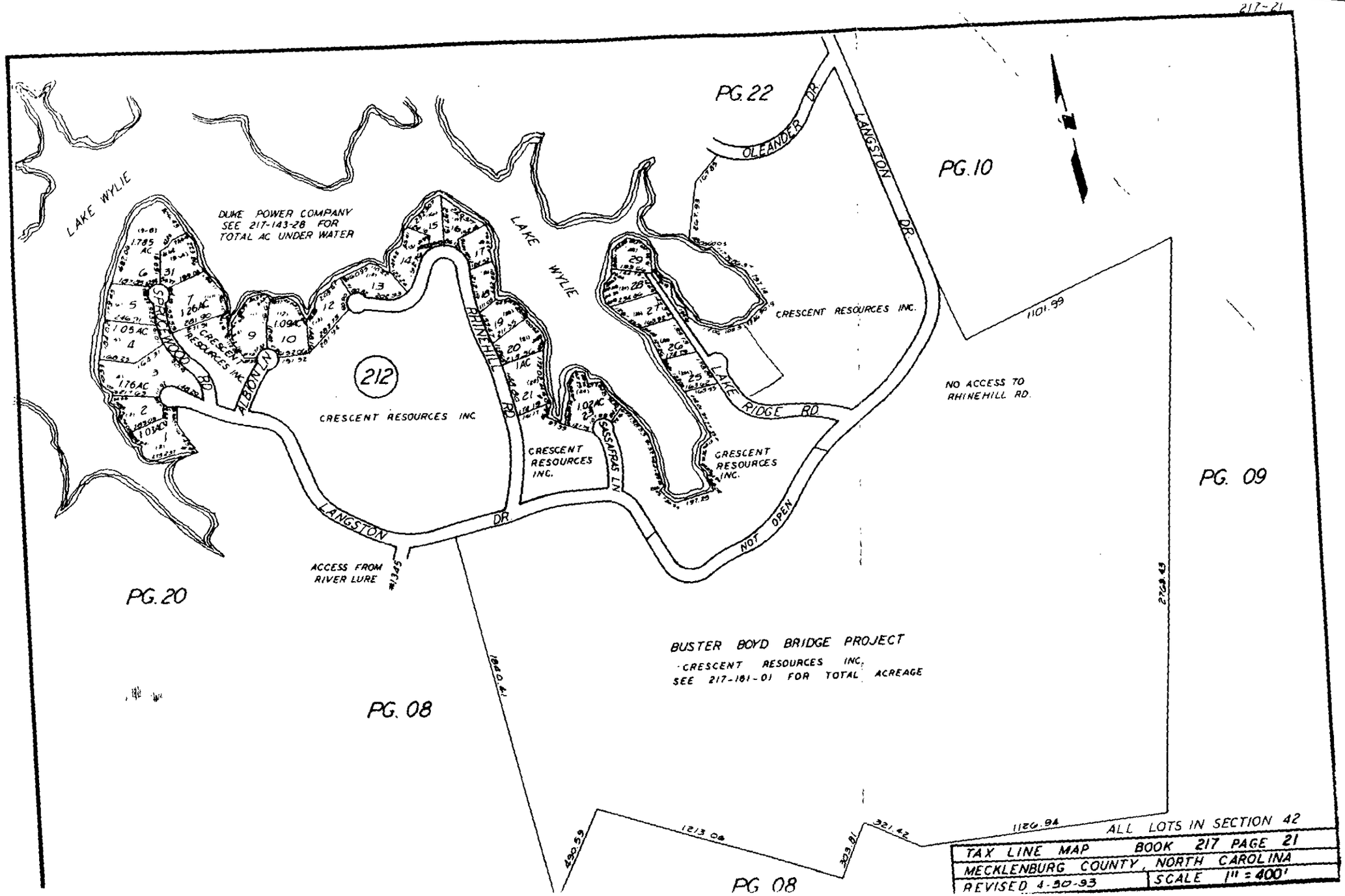
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[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

_____ Environmentalist Date

_____ Director or Authorized Section Head Date

WWATER : 122791



ALL LOTS IN SECTION 42

TAX LINE MAP BOOK 217 PAGE 21

MECKLENBURG COUNTY, NORTH CAROLINA

REVISED 4-30-93 SCALE 1" = 400'

1194B/3165A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

PD 50.00 ck# 24792 9/23/92 D.J.T. [] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

PERSON FILING APPLICATION:

NAME: CRESCENT RESOURCES, INC. ATTN: Jim Short
(last) (first) (mi)

ADDRESS: P. O. Box 1003 PHONE: (704) 373-4987

CITY: Charlotte STATE: NC ZIPCODE: 28201-1003

Date: September 16, 1993

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 217-161-01

STREET ADDRESS: Lake Ridge Road

Charlotte, NC

ZONING:

PROPERTY OWNER:

NAME: CRESCENT RESOURCES, INC.
(last) (first) (mi)

ADDRESS: (same as above) PHONE: (__) _____

CITY: STATE: ZIPCODE:

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[X] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [] 7 Mint Hill

TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres):

[X] SOIL TEST - INDIVIDUAL LOT (D)
[] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
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RESIDENTIAL PROPERTY (Type Building, check one):
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Signed: Jim Short Date: September 16, 1993

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

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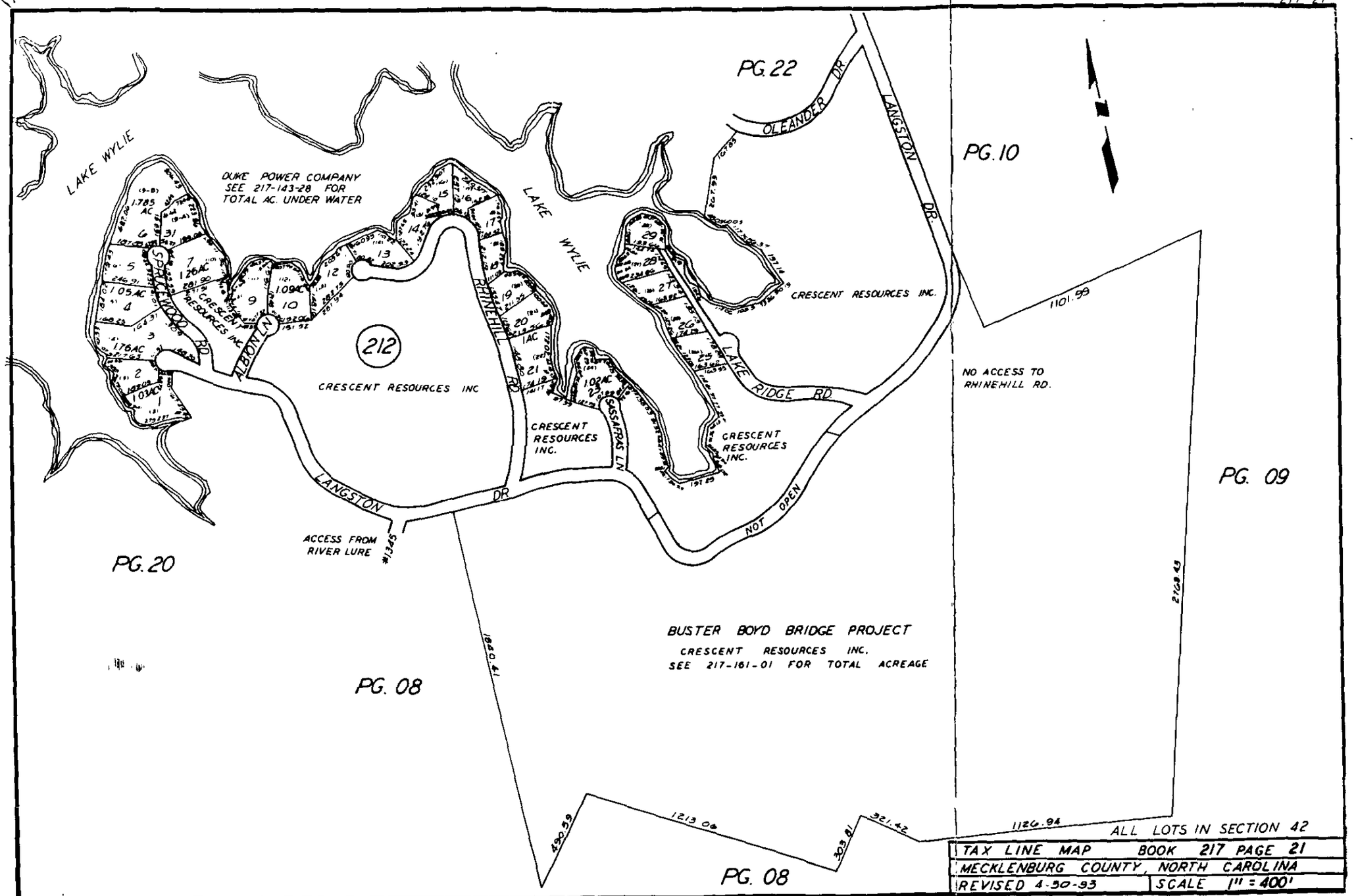
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_____ Environmentalist Date

_____ Director or Authorized Section Head Date

WWATER : 122791

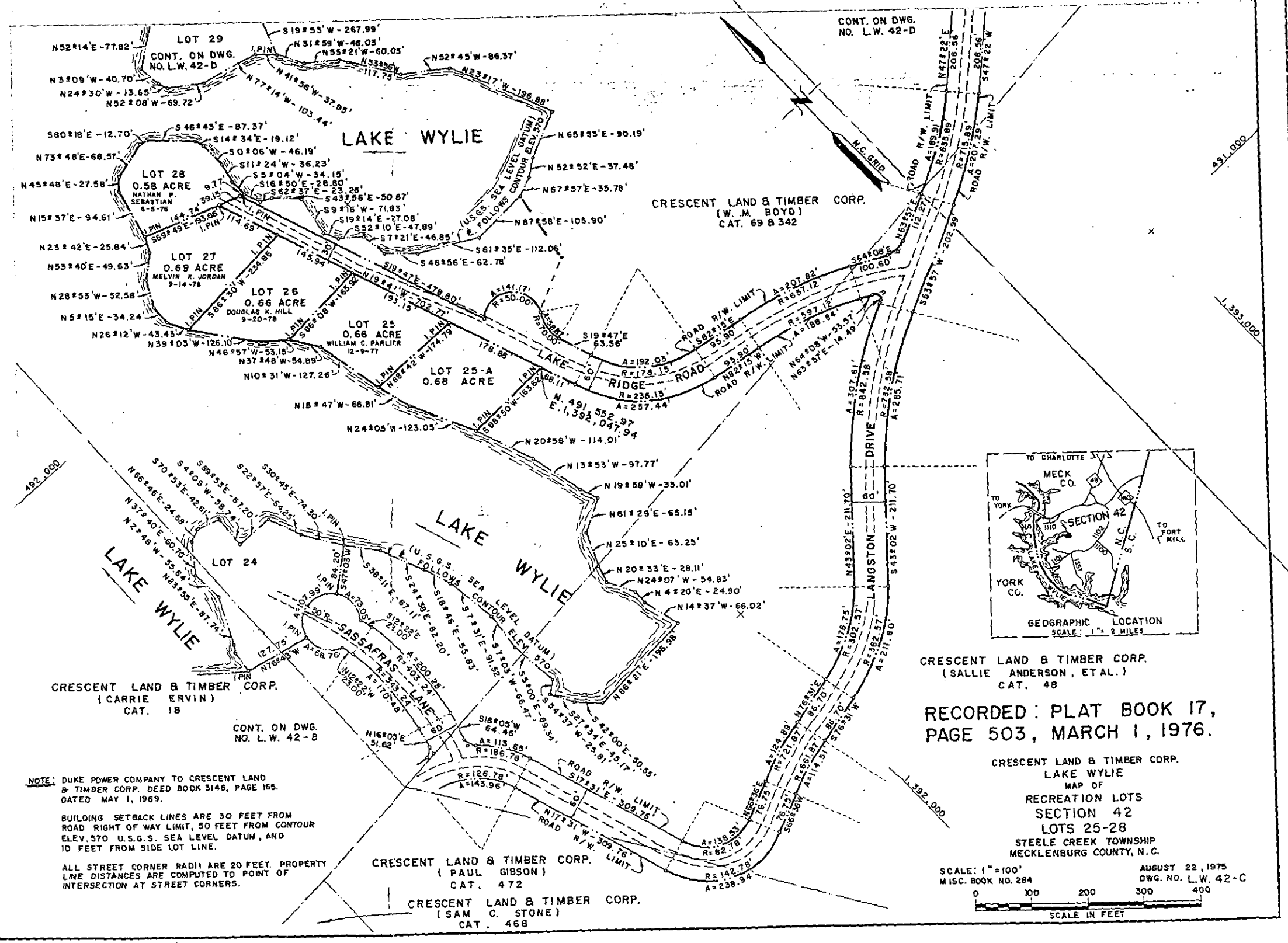


ALL LOTS IN SECTION 42

TAX LINE MAP	BOOK 217 PAGE 21
MECKLENBURG COUNTY, NORTH CAROLINA	
REVISED 4-30-93	SCALE 1" = 400'

FOR TAX PURPOSES ONLY

FOR TAX PURPOSES ONLY



NOTE: DUKE POWER COMPANY TO CRESCENT LAND & TIMBER CORP. DEED BOOK 3146, PAGE 165. DATED MAY 1, 1969.

BUILDING SETBACK LINES ARE 30 FEET FROM ROAD RIGHT OF WAY LIMIT, 50 FEET FROM CONTOUR ELEV. 570 U.S.G.S. SEA LEVEL DATUM, AND 10 FEET FROM SIDE LOT LINE.

ALL STREET CORNER RADII ARE 20 FEET. PROPERTY LINE DISTANCES ARE COMPUTED TO POINT OF INTERSECTION AT STREET CORNERS.

RECORDED: PLAT BOOK 17, PAGE 503, MARCH 1, 1976.

CRESCENT LAND & TIMBER CORP.
LAKE WYLIE
MAP OF
RECREATION LOTS
SECTION 42
LOTS 25-28
STEELE CREEK TOWNSHIP
MECKLENBURG COUNTY, N.C.

SCALE: 1" = 100'
MISC. BOOK NO. 284

AUGUST 22, 1975
DWG. NO. L.W. 42-C

0 100 200 300 400
SCALE IN FEET